



**Testimony of Michael Marks, MD, MBA, Connecticut Orthopaedic Society**

**Supporting *House Bill 6556 AN ACT CONCERNING THE CREDENTIALING PROCESS OF HEALTH CARE PROVIDERS BY HEALTH INSURERS***

**Insurance and Real Estate Committee – February 24, 2015**

Senator Crisco, Representative Megna and distinguished Members of the Insurance and Real Estate Committee, on behalf of the more than 250 orthopaedic surgeons of the Connecticut Orthopaedic Society, thank you for the opportunity to provide testimony in support of House Bill 6556 An Act Concerning the Credentialing Process of Health Care Providers by Health Insurers.

I am Dr. Michael R Marks MD MBA. I am a past president of the Connecticut Orthopaedic Society and currently serve on the Society's Board, was in private orthopaedic practice for many years in Norwalk and previously served as the Vice President of Business Development at Western Connecticut Health Network and was the President of the employed physician group at Norwalk Hospital.

With more Connecticut citizens enrolled in health insurance plans, access to health care and healthcare providers continues to be a challenge in Connecticut. As more providers are recruited to provide care, timely credentialing of providers by insurance companies plays an integral role in access to care. Currently, commercial insurance companies are not under requirements to render credentialing decisions in a specified time period, oftentimes leading to delays in providers participating in insurance plans resulting in patients who are not able to obtain care from a provider. In many cases, it may take a commercial carrier 90 days to complete the credentialing process once a file is considered complete. Commercial carriers will not reimburse a provider until the application is fully credentialed by the insurance company. On the other hand, Medicare and Medicaid will retroactively pay the doctor going back to the date that the application was deemed complete. The Affordable Care Act has done an excellent job providing insurance to more individuals than ever before. For this to be worthwhile coverage, it is necessary that the citizens have access to use that coverage.

The credentialing of providers has existed for decades. When the process began, the verification process was a laborious paper intensive process. Today, almost all of it can be done electronically. The credentialing of physicians by hospitals used to take months, now it can be done within 30 days. This past year I was able to renew my CT License, DEA and Controlled Substance registrations all on-line and received verification that it was successful immediately. Isn't it time that health insurance credentialing of providers be brought into the 21<sup>st</sup> Century. This bill would ensure that commercial health insurers credential all health care providers



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within 30 days from the time the credentialing application is considered complete. This new standard should also apply to any health care provider who is already credentialed by the insurance company but has a change in employment and as a result a new tax id number, to also ensure that the application be completed in 30 days.

On behalf of the Connecticut Orthopaedic Society, I urge you to support this bill. This bill is a reasonable request to shore up the process and improve the access to care that the patients in the state of Connecticut deserve, by ensuring timely credentialing of providers, which will increase access to care for our patients.

Thank you.

Submitted by:

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